



RESOURCE AND PATIENT MANAGEMENT SYSTEM

EHR Behavioral Health for CACs

Announcement and Agenda

July 16-18, 2013

Office of Information Technology (OIT)
Albuquerque, New Mexico

Table of Contents

1.0	Gener	al Information	3
	1.1	Purpose of Training	3
	1.2	Prerequisites	
	1.3	Intended Audience	4
	1.4	Course Material and References	
	1.4.1	At the IHS FTP Site	4
2.0	Learni	ng Objectives	5
3.0	Detaile	ed Agenda (Note: all Times in Mountain Standard Time)	6
	3.1	Day 1	6
	3.2	Day 2	7
	3.3	Day 3	9
	3.4	Office Hour Topics	

1.0 General Information

1.1 Purpose of Training

This is a three day course oriented towards Clinical Application Coordinators and Behavioral Health Program Managers involved with the set-up and implementation of an integrated model EHR at their facility. This Structured Classroom intensive hands-on training will be taught using Web Conferencing Technology and Satellite Classrooms at the (a) Office of Information Technology in Albuquerque, New Mexico (All Times are Mountain Time) and (b) multiple other locations [see website]. The instructors will teach via Classroom and Web Conference using the educational techniques of lecture, discussion, scripts, and "hands-on" computer experience with the RPMS EHR clinical application. Area Clinical Applications Coordinators (CACs) and Behavioral Health Professionals will serve as instructors, facilitators, mentors, and monitors at each of the computer training rooms.

Participants will:

Upon completion, participants should be able to:

- Identify Needs of Behavior Health Programs
- Delineate Workflow and Document a BH Encounter
- Examine Privacy & Security Issues
- Examine & Manage Alerts

Hands-on practice includes, but is not limited to:

- Set Up BH Clinics
- Set Up BH Providers
- Create Quick Notes for BH
- Create & Manage BH Consults
- Create Picklists
- Examine and Create BH TIU Business Rules
- Review & Revise BH TIU Note Templates
- Perform Medication Reconciliation
- Manage EHR Suicide Form

The training consists of lecture with PowerPoint presentations, demonstration of the tool, and hands-on exercises using individual computer terminals and a simulated training database.

July 16-18, 2013 General Information

1.2 Prerequisites

This course is oriented towards Clinical Application Coordinators and Behavioral Health Program Managers with a background in the Resource Patient Management System Electronic Health Record [RPMS-EHR] and Behavioral Health System (BHS) healthcare documentation. This is a Structured Classroom Activity. Participants MUST be in attendance at one of the Identified Classrooms.

IHS, Tribal and Urban Health Care Facilities that have assessed and determined that their Behavioral Health program will utilize the Electronic Health Record as their primary clinical documentation. This decision was made in consultation with Healthcare Administration, Behavioral Health Program Directors, Health Information Management and Clinical Staff.

1.3 Intended Audience

Clinical Application Coordinators, Behavioral Health Managers and EHR Super End Users/Trainers

1.4 Course Material and References

1.4.1 At the IHS FTP Site

The following materials may be downloaded from the RPMS Training FTP site at ftp://ftp.ihs.gov/pubs/EHR/Training/Manuals/EHR%20Behavioral%20Health%20for%20CACs/

July 16-18, 2013 General Information

2.0 Learning Objectives

- 1. Identify Unique Needs of BH Programs for EHR Utilization
- 2. Delineate Workflow and Document the Different Types of BH Encounters
- 3. Examine the Nuts and Bolts Required for the Successful Configuration of EHR to support the Integrated BH Model of Care
- 4. Set Up Behavioral Health Clinics
- 5. Set Up Behavioral Health Providers
- 6. Examine Privacy and Security Issues
- 7. Delineate and Create Business Rules
- 8. Review & Revise BH TIU Note Templates
- 9. Create BH Quick Notes
- 10. Configure and Manage Alerts for BH
- 11. Create and Manage Consults for BH
- 12. Create Picklists for Patient Education, ICD-9 and CPT with Associations
- 13. Manage the EHR Suicide Form

July 16-18, 2013 Learning Objectives

3.0 **Detailed Agenda** (Note: all Times in Mountain Standard Time)

3.1 Day 1

То	pic	Duration
8:3	8:30 AM	
	Welcome:	
Ry	an Garcia & Wendy Wisdom	
•	Introductions	
•	Day One Learning Objectives, Agenda, Training Materials	
•	Identify Participant Needs and Expectations	
	0 AM	30 min.
	e Nature of Behavioral Health Programs endy Wisdom	Tab 2
•	Identify the scope of BH services	
•	Define the Integrated Model of Care	
•	Define clinical documentation best practices for BH	
9:3	0 AM	45 min.
	havioral Health Encounter Documentation in EHR: endy Wisdom	Tab 3
•	Document a Behavioral Health Encounter Beginning to End in the EHR	
•	Delineate the BH EHR data flow within RPMS	
•	Explain the Difference between Ambulatory v/s Inpatient BH documentation in the EHR	
•	Document a Tele-BH Encounter	
•	Configure Order Entry for Prescribing BH Providers	
10:	10:15 AM	
Bre	Break	
	10:30 AM	
	havioral Health Encounter Documentation in EHR (Continued)	Tab 3
	30 AM	90 min.
	nch 0 PM	00
	บ คพ havioral Health Nuts and Bolts:	90 min. Tab 4
	endy Wisdom & Ryan Garcia	1404
•	Discuss the importance of identifying "owners" with the responsibility for configuration and maintenance of the BH components	
•	Review EHR and BHS Site Parameter Configuration to Optimize End User functionality	
•	Configure both the EHR and BHS for Combined Use	
•	Review configuration post-installation of BHS v4.0 Patch 3 and demonstrate generation of a monthly BHS (namespace AMH) export	
•	Configure, Insert, and Utilize the Activity Time Component in VueCentric Template	

Topic	Duration
2:30 PM	
Break	
2:45 PM	90 min.
Behavioral Health Provider Setup:	Tab 5
Elvira Mosely & Wendy Wisdom	
 Perform user setup for a Behavior Health provider (such as Mental Health, Chemica Dependency, and Social Services) 	ıl
Compare and Contrast BH User setup with Medical Practitioner setup	
Create Behavioral Health TIU User Class and Assign to BH Users	
Assign Security Keys	
Assign secondary menu options (if using BH GUI)	
4:15 PM	30 min.
Behavioral Health Program Services Configuration:	
Deborah Burkybile & Wendy Wisdom, Ryan Garcia	
Define appropriate Clinic codes for BH Program Activities	
 Examine unique considerations for specific clinics, i.e. Telehealth and Visits Outside of Regular BH Clinic Setting 	•
Create a Behavioral Health Provider Clinic in the Scheduling Application	
Create a Group Therapeutic Clinic	
4:45 PM	
Review, Questions, and Adjourn	

3.2 Day 2

Topic	
8:30 AM	30 min.
Day One Overview:	
Day One Review and Questions	
Day Two Learning Objectives and Agenda	
9:00 AM	45 min.
Privacy and Confidentiality:	Tab 7
Teresa Chasteen & Wendy Wisdom	
 Examine Confidentiality issues as they pertain to Behavioral Health documentation in the EHR 	
Examine and Configure the Use of Sensitive Patient Tracking for Behavioral Health	
 Review a Sample BH Consent for Treatment Document and Discuss its Disposition in the Medical Record 	
 Identify Available Resources for Privacy and Confidentiality Requirements and Sample Policies 	
9:45 AM	
Break	

То	pic	Duration
10	00 AM	90 min.
	J - Parameters and Business Rules:	Tab 8
Ph	il Taylor & Ryan Garcia	
•	Discuss Structure and Use of Business Rules and User Classes	
•	Examine TIU Business Rules for Behavioral Health Providers and Note Titles	
•	Describe Tier 1 and Tier 2 notes and explain how to set up EHR to protect patient privacy	
•	Create TIU Business Rules for BH Providers	
•	Discuss and Demonstrate Setting up Cosigners for TIU Notes	
•	Identify Policies and Procedures Needed for BH Regarding Utilization of EHR and/or BHS for Documentation of Clinical Services	
11:	30 AM	90 min.
Lu	nch	
	00 PM	30 min.
	J - Parameters and Business Rules (Continued)	Tab 8
	O PM	60 min.
	J Note Templates:	Tab 9
	il Taylor Discuss Various Desumentation Options for a BH Note and Incorporate into a TILL	
•	Discuss Various Documentation Options for a BH Note and Incorporate into a TIU Note Template	
•	Compare and Contrast Advantages and Disadvantages of using TIU Note Template Treatment Plans vs. Paper for BH in EHR	
•	Review and Revise a BH TIU Note Template	
•	Create a TIU Object and Insert the Object into the TIU Note Template	
•	Import a TIU Template	
2:3	60 PM	15 min.
Br	eak	
2:4	15 PM	30 min.
	ick Notes:	Tab 10
Da	vid Taylor	
•	Examine Use of Quick Notes for BH Providers	
•	Configure Appropriate Quick Notes for BH Providers	
	5 PM	45 min.
Suicide Form:		Tab 11
Ry	an Garcia & Phil Taylor	
•	Delineate Suicide Form Users and Roles and Responsibilities	
•	Explain the Reasoning for Having the Suicide tab and Describe How to set it up for Optimal Benefit to the Providers	
•	Add the Suicide Form Component to the VueCentric Template to Enable Documentation of Suicide Events	
•	Examine and Explain the Purpose Behind and Logic that Creates Suicide Community Alerts	

Topic	Duration
4:00 PM	
Alerts - Notifications, Broadcast and Chat:	
Amy Rubin & Robin Thompson	
Develop Guidelines for and Discuss appropriate use of the Broadcast and Chat	
 Structure Processes by which Notifications can be used to alert BH staff when a certain event occurs (e.g. a patient is placed in restraints) to Ensure Patient Safety and Effective Communication 	
 Categorize the Types of Notifications that can help End Users Obtain Information to Provide Care and Complete Documentation 	
4:45 PM	
Review, Questions, and Adjourn	

3.3 Day 3

Topic		
8:30 AM		
Day Two Overview:		
Day Two Review and Questions		
Day Three Learning Objectives and Agenda		
9:00 AM	90 min.	
Alerts - Patient Record Flag and Postings:	Tab 13	
Teresa Chasteen & Amy Rubin		
 Compare and Contrast Policies and Guidelines for Patient Flags and Note Title Alerts as they relate to a BH program 		
 Identify HIMS and BH Roles and Responsibilities for Management of Patient Flags and Note Title Alerts 		
Create a Patient Flag		
Generate a Patient Flag Due Report		
Compare and Contrast CWAD versus Treatment Contract in Personal Health		
10:30 AM		
Break		
10:45 AM	45 min.	
Measurement Configuration:	Tab 14	
Ryan Garcia & David Taylor		
Identify Measurements to be Documented by BH Providers		
Configure Data Entry and Display Components		
11:30 AM		
Lunch		

Topic	Duration	
1:00 PM		
Consults for BH: Robin Bartlett & Wendy Wisdom	Tab 15	
Differentiate between Consults and RCIS Referrals		
 Delineate a Clear and Consistent Process for Consult Management, from Initiation to Completion, to Promote Interdisciplinary Care 		
 Setup a Consult Beginning to End to Include: (a) Team, (b) Consult, (c) Quick Order, (d) Template, (e) Notifications 		
Generate Available Reports for Consult Management		
3:00 PM	15 min.	
Break 3:15 PM	60 min.	
Picklists for BH:	Tab 16	
David Taylor & Wendy Wisdom	Tab 10	
Customize ICD-9 Picklists (with DSM Narrative) for BH Providers		
Create CPT Superbill Picklists for BH providers		
Identify and Configure CPT Picklist Associations for BH Providers		
Create Patient Education Picklists for BH Providers		
Demonstrate Importing and Exporting Picklists		
4:15 PM	30 min.	
Medication Reconciliation:	Tab 17	
Wil Darwin		
Integrate the Use of the Patient Wellness Handout in the Med Rec Process		
 Explain why Outside Medications Data Population is Important in Maintaining a Complete Medication Profile 		
 Utilize the Principles, Practices, and Techniques for Documenting Patient Reported Medications 		
4:45pm Review, Questions, and Adjourn		

3.4 Office Hour Topics

Note: Topics may include but are not limited to	
Miscellaneous BH Topics:	
 Evaluate Actions of Activity Time Component and Consequences of Using BH Providers in Non-BH Visits 	
Discuss Activity Type Usage vs. CPT and its Effect on Reports	
RPMS Update: EHR Development in Progress that may be of Interest to BH	
Overview and Consideration of Vista Imaging for BH	
 Develop a Contingency Plan/Back-up Procedure (Save Off TIU Templates/Picklists for Easy Restoration) 	
Troubleshooting:	
 Identify Potential Errors and Issues Related to Information in EHR Not Passing to BHS Correctly 	
Correcting User Setup Issues	
Delineate Process for Obtaining Help for EHR Issues	
Show How to Create an Enhancement Request	